

# School District Activity Tracking Form

Complete one per district and return to the Department of Health Tobacco Prevention & Control Program OR enter into CATALYST by June 30, 2003

*ACTIVITIES FOR COMPREHENSIVE SCHOOL-BASED TOBACCO PROGRAMS MAY BE FUNDED BY A VARIETY OF SOURCES (Not only DOH)*

**District Name:** \_\_\_\_\_

**Form Completed by:** \_\_\_\_\_

*Name*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Affiliation (School, District, ESD)*

## **Expectations**

- This form can be filled out during the course of the year for school districts (used as both an end-of-year assessment & tracking form)
- This form may be filled out by district staff, P&I staff, ESD staff, or other appropriate persons
- Return this form by June 30, 2003 to:  
TBD

**Objective 1: POLICY IMPROVEMENT**

*“Policies” can include procedures, rules, or any mechanism for enforcement of an expectation. This section will also be entered as a “survey tool” in CATALYST*

| Policy Type   | Policy<br>P = In place<br>D = In development<br>N = Not addressed | Notes (Tech assistance, ideas, etc.) |
|---|---|--------------------------------------|
| 1. Policy Communication includes rationale for preventing tobacco use (e.g., tobacco use is leading cause of death)     | P D N   |                                      |
| 2. Smoking not allowed by anyone on school property   | P D N   |                                      |
| 3. Smokeless tobacco use not allowed by anyone on school property   | P D N   |                                      |
| 4. Smoking not allowed by anyone in school vehicles   | P D N   |                                      |
| 5. Smokeless tobacco use not allowed by anyone in school vehicles   | P D N   |                                      |
| 6. Smoking not allowed by anyone at off-campus school-sponsored events  | P D N   |                                      |
| 7. Smokeless tobacco use not allowed by anyone at off-campus school-sponsored events                                    | P D N   |                                      |
| 8. Tobacco advertising not allowed in school buildings  | P D N   |                                      |
| 9. Tobacco advertising prohibited at off-campus school functions  | P D N   |                                      |
| 10. Tobacco advertising prohibited in school publications   | P D N   |                                      |
| 11. Students not allowed to wear/use tobacco-related paraphernalia, clothes, or “gear”                                  | P D N   |                                      |
| 12. All students in district receive instruction regarding tobacco use or avoidance at some grade level or levels       | P D N   |                                      |
| 13. All school staff have access to programs to help them quit using tobacco  | P D N   |                                      |
| 14. Procedures exist for communicating policies to students, staff, parents, visitors                                   | P D N   |                                      |
| 15. There are provisions for equitable implementation of policies throughout the district                               | P D N   |                                      |
| 16. School programs/staff do not accept direct or indirect support (including resources) from tobacco industry sources. | P D N   |                                      |

## Output Reporting

| <i>Policy-related activity</i>                             | <i>Activity Description</i> | <i>Target Audience(s) &amp; number reached</i> |
|--|-----------------------------|--|
| S1.01 School district policy assessments                   |                             |  |
| S1.02 School district policy education or training         |                             |  |
| S1.03 Public awareness & education - policies              |                             |  |
| S1.04 Promote tobacco-free school norms (social marketing) |                             |  |
| S1.05 Policy advisory group                                |                             |  |

### For activity journal:

- Describe special successes in this area
- Describe special challenges or failures in this area
- What approaches for policy improvement were effective, or should be recommended to other districts? (from among those you have used)
- What approaches for policy improvement were NOT effective, or would NOT be recommended for other districts? (from among those you have used)
- Describe how (if) community members/organizations were involved in this effort.

## Objective 2: Provide Curriculum

### Output Reporting:

*Estimate the number of youth in your school district who received the following tobacco prevention curricula during the 02-03 school year:*

|                                   |   |                             |                             |                             |                             |                             |   |
|-----------------------------------|---|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|---|
| S2.01 Curriculum Review/Advisory  | <i>Describe the Activity &amp; number/types of people involved.</i> |                             |                             |                             |                             |                             |   |
| <i>Curriculum</i>                 | <i>4<sup>th</sup> and Younger Grades</i>                            | <i>5<sup>th</sup> grade</i> | <i>6<sup>th</sup> grade</i> | <i>7<sup>th</sup> grade</i> | <i>8<sup>th</sup> grade</i> | <i>9<sup>th</sup> grade</i> | <i>10<sup>th</sup> and Older Grades</i> |
| S2.02 Life Skills                 |   |                             |                             |                             |                             |                             |   |
| S2.03 TNT (Toward No Tobacco Use) |   |                             |                             |                             |                             |                             |   |
| S2.04 Great Body Shop             |   |                             |                             |                             |                             |                             |   |
| S2.06 Project ALERT               |   |                             |                             |                             |                             |                             |   |
| S2.07 Science, Tobacco & You      |   |                             |                             |                             |                             |                             |   |
| S2.08 Here's Looking at You       |   |                             |                             |                             |                             |                             |   |
| S2.09 Media Literacy              |   |                             |                             |                             |                             |                             |   |
| S2.10 Other (specify)             |   |                             |                             |                             |                             |                             |   |

\* note: S2.05 Strengthening Families was moved to "family involvement" section of workplans

### Activity Journal:

- Describe special successes in this area:
- Describe special challenges or failures in this area:
- What approaches for curriculum were effective, or should be recommended to other districts? (from among those you have used)
- What approaches for curriculum were NOT effective, or would NOT be recommended for other districts? (from among those you have used)
- Describe how (if) community members/organizations were involved in this effort.

**Objective 3: Provide training/information to increase support of tobacco prevention programs among school staff.**

**Output Reporting:**

*Describe training or education efforts targeted toward staff, and indicate the approximate number of staff members reached.*

| <i>Training Activity Name</i>                           | <i>Activity Description</i> | <i>Target Audience (General staff, counselors, nurses, admin, coaches, etc.)</i> | <i>Approx. # Reached</i> |
|---|-----------------------------|--|--------------------------|
| S3.01 Curriculum delivery training (specify)            |                             |  |                          |
| S3.02 "Tobacco 101"                                     |                             |  |                          |
| S3.03 Brief intervention/ motivational interviewing     |                             |  |                          |
| S3.04 Comprehensive school-based tobacco prevention     |                             |  |                          |
| S3.05 Key staff motivation (includes ongoing campaigns) |                             |  |                          |
| S3.06 Youth cessation programs                          |                             |  |                          |
| S3.07 Other trainings                                   |                             |  |                          |

**Activity Journal:**

- Describe special successes in this area:
- Describe special challenges or failures in this area:
- What approaches for staff training/education were effective, or should be recommended to other districts? (from among those you have used)
- What approaches for staff training/education were NOT effective, or would NOT be recommended for other districts? (from among those you have used)
- Describe how (if) community members/organizations were involved in this effort.

**Objective 4: Involve parents/family in tobacco prevention & control efforts for youth.**

**Output Reporting:**

*Describe training or education efforts targeted toward parents/family members, and indicate the approximate number reached.*

| <i>Activity Name</i>                               | <i>Training/Education Description</i> | <i>Target Audience (Parents of what age groups, risk factors)</i> | <i>Approx. # Reached</i> |
|--|---------------------------------------|---|--------------------------|
| S4.01 Family homework                              |                                       |   |                          |
| S4.02 Communication skill-building                 |                                       |   |                          |
| S4.03 Family motivation around tobacco             |                                       |   |                          |
| S4.04 Family Secondhand Smoke and Cessation Skills |                                       |   |                          |
| S4.05 Parent/Family Mentoring Progs                |                                       |   |                          |
| S4.06 Family volunteer progs                       |                                       |   |                          |
| S4.07 Family involvement with interventions        |                                       |   |                          |
| S4.08 "Strengthening Families" Prog                |                                       |   |                          |

**Activity Journal:**

- Describe special successes in this area:
- Describe special challenges or failures in this area:
- What approaches for parent/family training/education were effective, or should be recommended to other districts? (from among those you have used)
- What approaches for parent/family training/education were NOT effective, or would NOT be recommended for other districts? (from among those you have used)
- Describe how (if) community members/organizations were involved in this effort.

**Objective 5: Provide intervention programs for youth who are experimenting with or using tobacco.**

**Output Reporting:**

*Do not include youth served through P&I programs – these numbers will be obtained by DOH from RMC Research reports through OSPI.*

***REQUIRED:** Due to the unproven nature of these programs, youth participating in diversion or cessation programs should fill out a pre- and post-test, provided by DOH. These completed forms can be forwarded to DOH for entry.*

| <i>Activity Name</i>                               | <i>Intervention Description</i> | <i>Location</i> | <i>Approx. # Reached</i> |
|--|---------------------------------|-----------------|--------------------------|
| S5.01 Enhance P&I services                         |                                 |                 |                          |
| S5.02 Youth intervention/support progs (diversion) |                                 |                 |                          |
| S5.03 Support youth cessation programs             |                                 |                 |                          |

**Activity Journal:**

- Describe special successes in this area:
- Describe special challenges or failures in this area:
- What approaches for youth intervention were effective, or should be recommended to other districts? (from among those you have used)
- What approaches for youth intervention were NOT effective, or would NOT be recommended for other districts? (from among those you have used)
- Describe how (if) community members/organizations were involved in this effort.

**Objective 6: Link with Community programs for tobacco prevention and control.**

**Outputs**

| <i>Activity Name</i>                        | <i>Activity Description</i> | <i>Frequency of Activity</i> |
|---|-----------------------------|------------------------------|
| S6.01 School/community communication system |                             |                              |
| S6.02 Support youth program recruitment     |                             |                              |
| S6.03 Shared program resources              |                             |                              |

**Activity Journal:**

- Describe special successes in this area:
- Describe special challenges or failures in this area:
- What approaches for linking with community programs were effective, or should be recommended to other districts? (from among those you have used)
- What approaches for linking with community programs were NOT effective, or would NOT be recommended for other districts? (from among those you have used)



**Objective 7: Support assessment/evaluation activities**

Completion of information in this form, and participation in the Fall 2002 "Healthy Youth Survey" signify meeting this objective. Additional information is not necessary.

**Objective 8: (Optional) OTHER APPROACHES:**

*Describe efforts not included in previous pages. These should include activities that support or enhance comprehensive school-based tobacco prevention and control programs. These activities are not required or expected by DOH.*

**Output Reporting:**

S8.01 Peer Education Programs (Teens Against Tobacco Use, Teens As Teachers, etc.)

| <i>Date(s)</i> | <i>Program Type<br/>(TATU, other<br/>peer education)</i> | <i>Location</i> | <i>Est # Teen<br/>Teachers<br/>Trained</i> | <i>Est # Youth<br/>Receiving Peer<br/>Ed Presentations</i> |
|----------------|--|-----------------|--|--|
|                |  |                 |  |  |
|                |  |                 |  |  |
|                |  |                 |  |  |
|                |  |                 |  |  |
|                |  |                 |  |  |
|                |  |                 |  |  |

S8.02 Special Events (including motivational presentations, national event tie-ins, or assemblies that raise awareness about tobacco issues)

| <i>Date(s)</i> | <i>Description</i> | <i>Location</i> | <i>Est # Youth Reached</i> |
|----------------|--------------------|-----------------|----------------------------|
|                |                    |                 |                            |
|                |                    |                 |                            |
|                |                    |                 |                            |
|                |                    |                 |                            |
|                |                    |                 |                            |

S8.03 School-based Youth Coalitions/Youth Groups

| <i>Date(s)</i> | <i>Description/Activities</i> | <i>Location</i> | <i>Est # Youth Involved</i> |
|----------------|-------------------------------|-----------------|-----------------------------|
|                |                               |                 |                             |
|                |                               |                 |                             |
|                |                               |                 |                             |
|                |                               |                 |                             |
|                |                               |                 |                             |

**Activity Journal:**

- Describe special successes in this area:
- Describe special challenges or failures in this area:
- What approaches for enhancing school-based tobacco prevention programs were effective, or should be recommended to other districts? (from among those you have used)
- What approaches for enhancing school-based tobacco prevention programs were NOT effective, or would NOT be recommended for other districts? (from among those you have used)
- Describe how (if) community members/organizations were involved in program enhancement efforts.